





Andrew Harris Senior Coroner London Inner South

Dear Mr Harris,

Re: RCPCH Response to the Inquest Touching the Death of Isabela Suciu A Regulation 28 Report – Action to Prevent Future Deaths

Thank you for sharing a copy of your report with us regarding the tragic and untimely passing of Baby Isabela Suciu. We were saddened to read the circumstances surrounding Isabela's death and have discussed with senior colleagues within the RCPCH, and our specialty group the British Association of Perinatal Medicine (BAPM).

Whilst we are unable to comment on the specifics of case, we do support the view of BAPM who highlight a gap in evidence on whether the Kaiser Permanente Sepsis Risk Calculator or NICE categorical framework is a better tool for determining which babies are most at risk. I have attached BAPM's response here for completeness.

It is critically important that the National Institute for Health and Care Research funds activities seeking to address uncertainties in neonatal care and outcomes.

The College will be sharing information and suggestions for local improvement from your report with our paediatric members via its <u>patient safety portal</u>. Your report will also be shared for discussion at the next RCPCH Clinical Quality in Practice committee, where further actions may be identified.

Thank you for reminding us of the importance of this work.

Our sincere condolences are with Isabela's family.

Yours sincerely



RCPCH President



BAPM c/o RCPCH 5-11 Theobalds Road, London, WC1X 8SH

Sent via email 3 November 2023

Dear Mr Harris,

Many thanks for contacting the British Association of Perinatal Medicine (BAPM) about the sad death of Isabela Suciu. We are unable to comment on the specifics of cases but we have considered the points in your letter raised about the potential conflict in guidance between the Kaiser Permanente Sepsis Risk Calculator and the NICE categorical framework being used alongside the Newborn Early Warning Trigger and Track (NEWTT) score.

The Kaiser Permanente Sepsis Risk Calculator and the NICE categorical framework are tools to manage the risk of early onset infection in newborn babies. As infants can initially be asymptomatic or present with nonspecific symptoms, determining who should receive antibiotics can be a challenge, and is a balance between unnecessary use of antibiotics and avoiding harm from delayed antibiotic therapy.

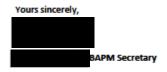
At present there is a lack of evidence on whether the Kaiser Permanente Sepsis Risk Calculator or NICE categorical framework is a better tool for determining which babies are most at risk. The revised April 2021 NICE guidance states that the Kaiser Permanente neonatal sepsis calculator can be used as an alternative to the NICE categorical framework for babies born after 34+0 weeks with ongoing prospective audit. A survey in 2022 showed that approximately one-third of hospitals in England followed KP SRC and two-thirds followed NICE guidance, with marked geographical variation.

Given the lack of gold standard randomised controlled trials to robustly test the KP SRC in the UK, the National Institute for Health and Care Research (NIHR) advertised a commissioned call inviting research applications to compare NICE versus KP SRC. Unfortunately none of the applications were funded.

BAPM continues to advocate for more neonatal research to be conducted to address uncertainties, and would support further research into this area. Whilst there has not been a gold standard randomised controlled trial in the UK comparing KP SRC versus NICE, there have been observational regional studies that have not shown strong evidence of harm.

While the two tools mentioned above are used to determine which babies need additional observations, The NEWTT2 chart can then be used to track these observations and provides recommendations on escalation where necessary. We do have material on our website to support the use of the NEWTT2 chart and we will add a section to our frequently asked questions to ensure that staff are clear on the difference between tools for determining which babies need additional observations and the NEWTT2 tool for tracking these observations. We will also issue a safety notice to our members to remind them of appropriate use of each of these tools.

I hope that the above information explains the current situation and that additional clarification around the use of the different tools in relation to the NEWTT2 chart will help to alleviate future confusion.



Moore HL et al Assessing variation in neonatal sepsis screening across England Archives of Disease in Childhood - Fetal and Neonatal Edition 2023;108:430-431

https://bmjopen.bmj.com/content/bmjopen/13/7/e072708.full.pdf.